

United States Environmental Protection
Agency Washington, D.C. 20460

OMB Approval 2070-174

DATA CALL-IN RESPONSE

INSTRUCTIONS: Please type or print in ink. Please read carefully the attached instructions and supply the information requested on this form.
Use additional sheet(s) if necessary.

1. Company Name and Address		2. Case # and Name 2315 Glutaraldehyde Chemical # and Name 043901 Glutaraldehyde		3. Date and Type of DCI and Number 28-Aug-2015 GENERIC ID # GDCI-043901-30859	
4. EPA Product Registration	5. I wish to cancel this product registration voluntarily	6. Generic Data		7. Product Specific Data	
		6a. I am claiming a Generic Data Exemption because I obtain the active ingredient from the source EPA registration number listed below.	6b. I agree to satisfy Generic Data requirements as indicated on the attached form entitled "Requirements Status and Registrant's Response."	7a. My product is an MUP and I agree to satisfy the MUP requirements on the attached form entitled "Requirements Status and Registrant's Response."	7b. My product is an EUP and I agree to satisfy the EUP requirements on the attached form entitled "Requirements Status and Registrant's Response."
8. Certification I certify that the statements made on this form and all attachments are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine, imprisonment or both under applicable law. Signature and Title of Company's Authorized Representative _____				9. Date	
10. Name of Company				11. Phone Number	

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REQUIREMENTS STATUS AND REGISTRANT'S RESPONSE

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1. Company Name and Address		2. Case # and Name 2315 Glutaraldehyde Chemical # and Name 043901 Glutaraldehyde				3. Date and Type of DCI and Number 28-Aug-2015 GENERIC ID # GDCI-043901-30859			
4. Guideline Requirement Number	5. Study Title	P R O T O C O L	Progress Reports			6. Use Pattern	7. Test Substance	8. Time Frame (Months)	9. Registrant Response
			1	2	3				
	Environmental Fate Data Requirements (Antimicrobial)								
835.4100	Aerobic soil metabolism (1 ,2)	N				V, R, U, Y, T, X, Z	TGAI	24	
10. Certification I certify that the statements made on this form and all attachments are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine, imprisonment or both under applicable law Signature and Title of Company's Authorized Representative _____							11. Date		
12. Name of Company							13. Phone Number		

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FOOTNOTES AND KEY DEFINITIONS FOR GUIDELINE REQUIREMENTS

Case # and Name: 2315 Glutaraldehyde

DCI Number: GDCI-043901-30859

Key: TGAI = Technical Grade Active Ingredient [TGAI]

Use Categories Key:

R - Agricultural premises and equipment V - Medical premises and equipment Z - Industrial processes and water systems
T - Commercial, institutional and institutional X - Materials preservatives
U - Residential and public access points Y - Industrial processes and water systems

Footnotes: The following footnotes are referenced in column two (5. Study Title) of the Requirements Status and Registrant's Response form. These footnotes apply in addition to any test notes included in 40 CFR Part 158 with respect to the particular data requirement

1 The environmental media (soil, water, hydrosol, and biota) to be utilized in these studies must be collected from areas representative of potential use sites.

2 For industrial processes and water systems, and aquatic areas, data are required for use sites that are intermittently dry.